FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2004 - Dec 31, 2009	FORM B For use by candidates and new employee	FEB 0 4 2010.
Name: Mariannelle Miller Meeks Day	ytime Telephone: 641-683-7551	2010 FEB 18 AM 11: 5
Filer Candidate for the State: IA	Date of	(Office Use Only)
Status  New officer or employee  Employing Office:  all sections, please type or print clearly in black ink.	Election: Nov 2, 2010 Check if Amendment	A \$200 penalty shall be assessed against anybody who files more than 30 days late.
RELIMINARY INFORMATION — ANSWER EACH OF TO Did you or your spouse have "earned" income (e.g., salaries or yes) of \$200 or more from any source in the reporting period?  Yes No long N	IV. Did you hold any reportable positions on or of filing in the current calendar year or in the prince of filing in the current calendar year or in the prince of the pri	rrangement  Yes No V
Each question in this part must be answered and the	If yes, complete and attach Schedule VI	Yes No No
CLUSION OF SPOUSE, DEPENDENT, OR TRUST INFO	ORMATION — ANSWER EACH O	FTHESE OUESTIONS
The disclosed, Dave voll availand from the	- "-" " On Onloid Condict and cortain aba "-	

# SCHEDULE I—EARNED INCOME (INCLUDING HONORARIA)

Name Mariannette Miller-Meeks

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List the source, type and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

**Exclude:** Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

	Source (include date of receipt for honoraria)	Type	Amount					
	Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year				
	XYZ Corporation, Houston, Texas	Salary	\$6,300	\$28,450				
Examples:	First Bank & Trust, Houston, Texas	Director's Fee	\$400	\$3,200				
	XYZ Trade Association, Chicago, IL. (Rec'd December 2)	Honorarium	0	\$1,000				
-	Harris County, Texas Public Schools	Spouse Salary	NA	NA				
Heart	land Eye Care	Buy Out	\$48,000	a \$ 260,000				
OHun	Land Eye Care wa Regional Health Center f Care	Sponse salary hocum Tenens Solary	\$112,008	2 \$ 260,000 \$105,008				
Staf	f Care	Locum Tenens Solary	\$28 000					
		,						
		,						

## SCHEDULE II—ASSETS AND "UNEARNED" INCOME

#### BLOCK A BLOCK B BLOCK C **BLOCK D** Asset and/or Income Source Value of Asset Type of Income **Amount of Income** Indicate value of asset at close Check all columns that apply. For Identify (a) each asset held for investment or For retirement plans or accounts that do not production of income with a fair market value of reporting year. If you use a retirement plans or accounts that allow you to choose specific investments, you exceeding \$1,000 at the end of the reporting do not allow you to choose specifvaluation method other than fair may write "NA" for income. For all other period, and (b) any other asset or sources of ic investments, you may write "NA." market value, please specify the assets, including all IRAs, indicate the cateincome which generated more than \$200 in For all other assets including all method used. "unearned" income during the year. For rental gory of income by checking the appropriate IRAs. indicate the type of income property or land, provide a complete address. by checking the appropriate box box below. Dividends and interest, even if If an asset was sold during the Provide full names of stocks and mutual funds below. Dividends and interest. reinvested, should be listed as income. reporting year and is included (do not use ticker symbols). For all IRAs and even if reinvested, should be Check "None" if no income was earned or only because it generated other retirement plans (such as 401(k) plans) listed as income. Check "None" if generated. income, the value should be that are self directed (i.e., plans in which you asset did not generate any income have the power, even if not exercised, to select "None." during calendar year. the specific investments), provide the value and income information on each asset in the Other Type of Income (Specify: For Example, Partnership Income or Farm Income) ABCDEFGHI JK account that exceeds the reporting threshold. **Current Year Preceding Year** For retirement plans that are not self-directed, name the institution holding the account and III IV V its value at the end of the reporting period. For ıv VI VII VIII IX X XI VI VII VIII IX X XI an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 CAPITAL GAINS EXCEPTED/BLIND TRUST \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Exclude: Your personal residence(s) (unless \$1,000,001 - \$5,000,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 there is rental income); any debt owed to you \$100,001 - \$1,000,000 \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$10,000 by your spouse, or by you or your spouse's \$15,001 - \$50,000 child, parent, or sibling; any deposits totalling Over \$50,000,000 \$1,001 - \$15,000 \$5,000 or less in personal savings accounts; None \$1 - \$200 \$201 - \$1,000 NONE DIVIDENDS RENT any financial interest in or income derived from INTEREST U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. X SP Mega Corp. Stock DC. Examples: Simon & Schuster Indefinite Rovalties 1st Bank of Paducah, KY accounts IT 214 & Manning Derdoe House IT Southwest Airlines Stock St Cohevent Stock College Saving Form - Vanguard X sp College Savings Java - Vanguard K Drudential Retirement Guaranteed Int Act

# SCHEDULE II—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name mariannette 5 Miller, Meeks Page 3 of 3

1	BLOCK A	BLOCK B	BLOCK C	BLOG	CK D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount o	of Income
		A B C D E F G H I J K L		Current Year	Preceding Year
1 1000000	Prudential Retirement	None \$1.001 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$250,001 - \$250,000 \$500,001 - \$1,000,000 \$500,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000	DIVIDENDS  RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify)	Nore	None
gp o	American Bond Prydential Bothrement	X	*	X	X
5P	American Bond Prudential Rothrement American Ends was Mustral A Prudential Retirement Fridelity Ad Midcop	¥   ¥	\$ X	X	X I
SP SP	Prudential Refirement Amerikan FundsCaputorid G/IA	X	X	<u>×</u>   (8.1)	<b>(</b>
se l	IRA Vanguard Equity Free	X	<u> </u>	×	X
	IRA Vanguard HealthCare	×		X	X
F	TIAA CREF matual funds Growth . Income	Х	X X		X
57	TIAA CREF Mid-Cap	××		×	<u> </u>
7	TIAA CREE Mother Runds Growth Income  TIAA CREE  Mid-Cap  TIAA CREE  Small Cap  PIAA CREE  Real Estate	X	عرا	×	X
.7	Real Estates TIMA -CREP	×	X	×	X
7 1	iO	X	Y	<b>X</b>	X
+	Schwals 401K Retirement SCHWalls 401K Retirement SCHWALLS COP, Microcop BABBONAL copping coperation BABBONAL conjung emerging market BABBONAL conjung emerging market BABBONAL copping and company BABBONAL COPPET (Struck, Growth Bequity Inclay Global Equities	X		X & X	
-	OFA Ly cap international TIAA-CICEF (Stuck, Growth		V		
	Equity Inday Global Equities		X		

S	CI	4E	DI	11	F	Ш		11	Δ	RII	ITIES	
J	VI		u	<i>_</i>	_		_		~	DIL	. 1 1 1 1 2 3	

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Report liabilities of over \$10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

						Am	ount o	of Lial	oility			
SP, DC, JT	Creditor	Type of Liability	B - 000'518	\$15,001— \$50,000 <b>O</b>	\$50,001— \$100,000	\$100,001— \$250,000 <b>TI</b>	\$250,001— \$500,000	\$500,001— 61,000,000	\$1,000,000,58 \$5,000,000	\$5,000,001— \$25,000,000 —	\$25,000,001— \$50,000,000	Over \$50,000,000 <b>X</b>
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main Street, Dover, Del.				X		0,0,		0,0,		J 47
					Maria N		96 (1) 10 (1) 10 (1)					
		·										
							Production of the second		I			

### **SCHEDULE IV — POSITIONS**

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

**Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature.

Position	Name of Organization

		11 t = 1 - 1
SCHEDULE V—AGREEMENTS	Name	
Identify the data former employer.  Parties To	with respect to: future employment; a leave of at er than the U.S. Government; or continuing partic	Page of
Parties To	er than the U.S. Government; a leave of at	osence during the period of an

Identify the detailed former employer.  Parties To	ent with respect to: future employment; a leave of absence during the period of government other than the U.S. Government; or continuing participation in an employee welfare or ben-
	Terms of Agreement
HEDULE VI—COMPENSATION IN EXCESS	

# SCHEDULE VI—COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. Government and any information if you directly provided the services generating recognized by law. **Do not repeat information listed on Schedule I**.

Source (Name and Address)  Example: Doe Jones & Smith, Hometown, Homestate		nonprofit organization if you directly provided the services generating mation considered confidential as a result of a privileged relationship
	Accounting services	Brief Description of Duties
		- Miles